## IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

PHOENIX PAYMENT SYSTEMS, INC.	)	
d/b/a ELECTRONIC PAYMENT	)	
EXCHANGE,	)	
	)	
Plaintiff,	)	
	)	
V.	)	C.A. No. 07-537 (***)
	)	
LEXCEL, INC. and LEXCEL	)	
SOLUTIONS, INC.,	)	
	)	
Defendants.	)	

## DECLARATION OF MAILING AND OF SERVICE PURSUANT TO D. DEL. L.R. 4.1(b)

I, Julia Heaney, declare as follows:

- 1. I am a partner in the law firm of Morris, Nichols, Arsht & Tunnell LLP, Delaware counsel for plaintiff in this action.
- 2. Copies of the summons and complaint in this action were served on September 10, 2007 on Lexcel, Inc. and Lexcel Solutions, Inc. pursuant to 10 Del. C. § 3104, by hand delivery to the Delaware Secretary of State with the statutory fee of \$2.00 per defendant.
- 3. A copy of the summons showing service on the Secretary of State was filed on September 10, 2007.
- 4. On September 10, 2007, copies of the summons, complaint, and Notice of Availability of a United States Magistrate Judge were sent by Registered Mail, Return Receipt Requested, to:

Lexcel, Inc. Lexcel Solutions, Inc. 4110 N. Scottsdale Road Suite 360 Scottsdale, AZ 85251

5. I attach the registered mail receipt showing that the summons and complaint were delivered to Lexcel, Inc. and Lexcel Solutions, Inc. as Exhibit A.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on September 25, 2007

/s/Julia Heaney (#3052)	
Julia Heaney (#3052)	

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## EXHIBIT A

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  Agent  Addressee  B. Received by (Printed Name)  C. Date of Delivery  MACUA SIVEVESIV 9/20/07
1. Article Addressed to: Lexcel, Inc. Lexcel Solutions, Inc. 4110 N. Scottsdale Road Suite 360	D. Is delivery address different from item 1? ☐ Yes  If YES, enter delivery address below: ☐ No
Scottsdale, AZ 85251	3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
·	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number RA 016 099 144 US (Transfer from service label)	
PS Form 3811, February 2004 Domestic R	eturn Receipt 102595-02-M-1540

Unr	FIST-Class-Mall Postage & Fees Paid USPS Permit Noz G-10
	• Sender: Please print your name, address, and ZIP+4 in this box •
	Julia Heaney (60486) Morris, Nichols, Arsht & Tunnell LLP 1201 N. Market Street Wilmington, DE 19801-1347
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